



7900 Fitch Road, Olmsted Township, OH 44138

Phone Number: 440-235-4225 building@olmstedtownship.org

APPLICATION FOR ZONING AMENDMENT

Application No					Fee Paid: <u>\$400.00</u>		
		gned applies for zoning amendment are true and correct.	t. The hereby certifies that all info	ormation a	nd attachments to this		
аррпса		are true and correct.					
		Text Amendment	Map amendment		PUD Modification		
1.	Pro Sul	operty Address:odivision:	Parcel / Lot No.				
2.	Ap Ap _l	plicant name: plicants email address (Required): _ plicants Address:	Phone #:				
3.	Ow Ow	ner name: ner email address: (Required) ner Address:	Phone #:				
4.							
5.		esent use:					
6.	Pro	pposed Use:		_			
7.	Pre	esent Zoning district:	Proposed Zonin	g District:			
8.	Attach the following supporting information:						
	a. A scaled vicinity map showing lines and ownership, thoroughfares, existing and proposed zoning.						
	b. A list of all property owners and their mailing addresses who are within, contiguous to, or directly across the street from the Parcel(s) proposed to be rezoned and other that may have substantial interest in the case.						
	c. A statement on how the proposed amendment relates to the comprehensive plan.d. If amendment is a PUD modification, a statement in detail on the proposed modification.						
	e. Notarized signature (or copy of driver's license) of acknowledgement from owners or Homeowner's Association President if PUD modification.						
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BUILDING DEPARTMENT

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9. Attach any requested, supplemental, or necessary documentation or information (NOTE: Zoning amendments do not affect any deed restrictions to property)

Applicants Signature:		Date:		
	All Property Owner(s) and Le	essee(s) Signatures below:		
	Date:	Date:		